

**COMBINED DECLARATION AND POWER OF ATTORNEY**  
 (Includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NO.  
**54320-8006.US01**

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**CONVOLVULUS SOLDANELLA COMPOSITIONS AND METHODS FOR USE**

the specification of which (check only one item below):

- is attached hereto.
- was filed as United States application Serial No. \_\_\_\_\_ on \_\_\_\_\_,
- and was amended on \_\_\_\_\_, (if applicable)
- was filed as PCT international application Number PCT/US2005/009019 on 03/17/2005.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR §1.56(a).

I hereby claim foreign priority benefits under 35 U.S.C. §119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate or 365(a) of any PCT international application(s) which designated at least one country other than the United States of America listed below and have also identified below, by checking the box, any foreign application(s) for patent or inventor's certificate, or of any PCT international application(s) having a filing date before that of the application(s) on which priority is claimed.

**PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. §119:**

COUNTRY (if PCT, indicate "PCT")	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 USC §119	
			<input type="checkbox"/> YES	<input type="checkbox"/> NO
			<input type="checkbox"/> YES	<input type="checkbox"/> NO
			<input type="checkbox"/> YES	<input type="checkbox"/> NO

I hereby claim the benefit under 35 U.S.C. §120 of any United States application(s) or 365(c) of any PCT international application(s) designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT application(s) in the manner provided by the first paragraph of 35, U.S.C. §112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR §1.56(a) which became available between the filing date of the prior application(s) and the national or PCT international filing date of this application.

**PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT UNDER 35 USC §120:**

U.S. APPLICATIONS		STATUS (Check one)		
U.S. APPLICATION NUMBER	U.S. FILING DATE	PATENTED	PENDING	ABANDONED
60/554,112	17 March 2004			X
60/588,848	15 July 2004			X
PCT APPLICATIONS DESIGNATING THE U.S.				
PCT APPLICATION NO.	PCT FILING DATE	U.S. Serial Nos. Assigned (if any)		
PCT/US2005/009019	17 March 2005			X

**POWER OF ATTORNEY:** As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith: All attorneys associated with Customer No. 22918; all affiliated with Perkins Coie LLP.

<b>COMBINED DECLARATION AND POWER OF ATTORNEY (CONTINUED)</b> <b>(Includes Reference to PCT International Applications)</b>			ATTORNEY'S DOCKET NO. <b>54320-8006.US01</b>
Send Correspondence to: Perkins Coie LLP P.O. Box 2168 Menlo Park, CA 94026 Customer No. 22918		Direct Telephone Calls to: Jacqueline F. Mahoney (650) 838-4410	
FULL NAME OF INVENTOR 201	FAMILY NAME <b>HOANG</b>	FIRST GIVEN NAME <b>Ba</b>	SECOND GIVEN NAME <b>X.</b>
RESIDENCE & CITIZENSHIP	CITY <b>Hayward</b>	STATE OR FOREIGN COUNTRY <b>California</b>	COUNTRY OF CITIZENSHIP <b>VN</b>
POST OFFICE ADDRESS	POST OFFICE ADDRESS <b>4155 Moorpark Avenue, #20</b>	CITY <b>Hayward</b>	STATE & ZIP CODE/COUNTRY <b>CA 94544</b>
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.			
SIGNATURE OF INVENTOR 201			
Date	Signature		